



## HEALTH SERVICES UTILIZATION AND RESEARCH COMMISSION

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September 21, 2000

Dear colleague,

In our summary report *The Impact of Preventive Home Care and Seniors Housing on Health Outcomes*, released this May, we erred in one of our sub-analyses. **The error does not change the overall findings of the study, or HSURC's recommendations.**

Specifically, Table 3, which shows estimated outcomes of preventive home care by service type, is incorrect. We are enclosing a corrected table, as well as detailed errata for two other sentences in the report that are affected by the corrected analysis. Please insert this in your copy of the report. Corrected full reports are available from our website at <http://www.sdh.sk.ca/hsurc/>.

The error in this sub-analysis occurred when we dropped a line of code in our programming while copying it from another analysis. The result was that we added together all services received over six years, rather than for the previous three months. The error affects only the sub-analysis reported in Table 3.

We want to thank the sharp-eyed practitioners in the home care system who, during our district presentations, identified that the levels of service received were not, from their experience, realistic. That led us to recheck the results and identify the error.

Sincerely,

Laurence (Laurie) Thompson, CEO

## The Impact of Preventive Home Care and Seniors Housing on Health Outcomes

### Amendment to Table 3, page 5

Preventive home care sub-service analysed by thirds of service used	Relative risk* for:	
	Death	Loss of independence
Nursing by a registered nurse		
▪ low (0.1 to 2 hours per three months)	1.5	1.6
▪ medium (2.1 to 5.25 hours three months)	1.9	1.9
▪ high (5.26 hours plus per three months)	2.5	2.4
Homemaking and personal care		
▪ low (0.1 to 8.25 hours per three months)	1.2	1.5
▪ medium (8.26 to 17 hours per three months)	**1.1	1.4
▪ high (17.1 hours plus per three months)	1.1	1.6
Meals		
▪ low (0.1 to 26 meals per three months)	1.2	1.6
▪ medium (27 to 51 meals per three months)	**1.1	1.3
▪ high (52 meals plus per three months)	**1.0	1.3

\* compared to those not receiving the service

\*\* not statistically significant

### Amendment to text, page 5

toring clients and teaching families to provide care for clients. *(Therapies are a fourth service offered under the preventive home care umbrella, however, in our data, this service accounted for less than one per cent of the service delivered, and has thus been excluded from this analysis.)* To further investigate our findings, we divided preventive home care into these three sub-services, then analysed each by quantity of service delivered over a three-month period (i.e., lowest, middle, or highest amount of units). After holding all other factors equal (i.e., adjusting for health status and receipt of other services in the same quarter), we found seniors receiving low, medium, or high levels of nursing preventive home care services were at greater risk for dying than seniors not receiving these services (Table 3). ~~Seniors receiving medium or high levels of homemaking and personal care or meals were at a slightly lower risk of dying than seniors not receiving these services.~~

### Amendment to Conclusions and Discussion, page 7

#### *Preventive home care*

- Seniors receiving preventive home care are more likely to die or lose their independence than seniors not receiving this service.
- ~~Seniors receiving high amounts of homemaking have a slightly reduced risk of death and loss of independence.~~